

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			5/21/00
O.I.P.E. CLASSIFIER		10	2/2
FORMALITY REVIEW		5917	2-16-00
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
3	10/3/00
4	10/3/00
5	10/3/00
6	10/3/00
7	10/3/00
8	10/3/00
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Claim	Date
Final	
Original	
52	10/3/00
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99	10/3/00
100	10/3/00

Claim	Date
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If more than 150 claims or 10 actions  
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